PTO/SB/17 (10-08)

Approved for use through 05/30/2010. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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rees pursuant to the Consolidated Approp			10/09/,02/-0011. #1099			
FEE TRANS			October 31, 2003			
For FY 20			Kazuo Okada			
F01 F1 20	Examiner Name R. Hsu					
Applicant claims small entity stat	Il entity status. See 37 CFR 1.27 Art Unit 3714			714		
TOTAL AMOUNT OF PAYMENT	AMOUNT OF PAYMENT (\$) 1,300.00 Attorney Docket No. SHO-0043			HO-0043		
METHOD OF PAYMENT (check	all that apply)			<del></del>		
Check Credit Card	Money Order N	one Other	(please identif	iv).		
x Deposit Account Deposit Account			•	Rader, Fishm	an & Gra	UST PLIC
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For the above-identified depo	•	<u> </u>	•			
Charge fee(s) indicated	d below	Charg	e fee(s) indic	cated below, ex	cept for t	ne filing fee
Charge any additional fee(s) under 37 CFR 1.	fee(s) or underpayments .16 and 1.17	of x Credit	any overpay	ments		
FEE CALCULATION						
1. BASIC FILING, SEARCH, AND E	XAMINATION FEES					
FI		EARCH FEES	EXAMINA	ATION FEES		
Application Type Fee (\$	Small Entity  S) Fee (\$) Fee (	Small Entity  \$) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees I	Paid (\$)
Utility 330			220	110		
Design 220	110 100	50	140	70		
Plant 220	110 330	165	170	85		
Reissue 330			650	325		
Provisional 220	110	0	0	0		
2. EXCESS CLAIM FEES						Small Entity
Fee Description Each claim over 20 (including Re	aiceuge\				Fee (\$) 52	Fee (\$) 26
Each independent claim over 3 (	•				220	110
Multiple dependent claims					390	195
Total Claims Extra Claim	s Fee (\$)	Fee Paid (\$)	Mu	Itiple Depende		
11 - 20 or HP	x =	377	Fee		ee Paid (	
HP = highest number of total claims paid for	r, if greater than 20.					_
Indep. Claims Extra Claim	s Fee (\$)	Fee Paid (\$)				
2 3 or HP =	_ × =					
HP = highest number of independent claims	s paid for, if greater than 3.					
3. APPLICATION SIZE FEE						
If the specification and drawing						
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets Extra Sheet		additional 50 or fra		Fee (\$)	Fee	Paid (\$)
- 100 =	/50 =	_ (round up to a who	ole number) x	=	·	D-i-l (0)
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity						
Other (e.g., late filing 1252 Extension for response within second month 490.00						
surcharge):						
SUBMITTED BY						
Signature AU DC		Registration No. (Attorney/Agent)	29,211	Telephone	(202) 95	5-3750
Name (Print/Type) Carl Schaukowito	zh			Date	July 22	, 2009

PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0651-0032

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). JUL 2 2 2009 **FEE TRANSMITTAL** For FY 2009

Complete if Known				
Application Number	10/697,027-Conf. #1099			
Filing Date	October 31, 2003			
First Named Inventor	Kazuo Okada			
Examiner Name	R. Hsu			
Art Unit	3714			
Attorney Docket No.	SHO-0043			

Applicant claims small entity status. See 37 CFR 1.27		Art Unit		3714				
TOTAL AMOUNT OF	PAYMENT	(\$) 1,300.	00	Attorney Docket	No.	SHO-0043		
METHOD OF PAYMENT (check all that apply)								
Check	Credit Card	Money Order	No	ne Other	(please ide	entify):		
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	ove-identified depo		Director is	<del></del>				
X Char	ge fee(s) indicated	below		Charg	e tee(s) i	ndicated below, e	xcept for the	filing fee
	ge any additional fo ) under 37 CFR 1.		yments o	f x Credit	any over	payments		
FEE CALCULA	TION							
1. BASIC FILING,	•							
ł	FIL	ING FEES Small Entity	SE	ARCH FEES Small Entity	EXAM	INATION FEES Small Entity	<b>;</b>	
Application Type	Fee (\$)		Fee (\$		Fee (\$		Fees Pa	aid (\$)
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		
2. EXCESS CLAIM	I FEES						9	mall Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over							52	26
Each independer Multiple depende		ncluaing Keissi	ues)				220	110
			_			86 W. L. III	390	195
Total Claims	Extra Claims or HP		F	ee Paid (\$)		Multiple Depend		
11 -20 of HP = 1 Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims	Extra Claims		F	ee Paid (\$)				-
	r HP =	x =						
HP = highest number	of independent claims	paid for, if greater th	an 3.					
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra Sheets			dditional 50 or fra		eof Fee (\$)	Fee P	aid (\$)
- 100 = /50 = (round up to a whole number) x =								
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity								
Other (e.g., late filing / 1252 Extension for response within second month 490.00								
surcharge): 1801 Request for continued examination (RCE) (see 37 810.00								
SUBMITTED BY								
Signature (	W D			Registration No. (Attorney/Agent)	29,21	1 Telephone	(202) 955	-3750

Registration No. (Attorney/Agent) 29,211 Telephone (202) 955-3750  Name (Print/Type) Carl Schaukowitch Date July 22, 2009	SUBMITTED BY	1//				
Name (Print/Type) Carl Schaukowitch Date July 22, 2009	Signature	ay SC		29,211	Telephone	(202) 955-3750
	Name (Print/Type)	Carl Schaukov	vitch		Date	July 22, 2009